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PTO/SB/A3 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	09/720,583
	Filing Date	June 25, 1999
	First Named Inventor	Pieter H. POWELS
	Art Unit	1652
	Examiner Name	M. Walicka
	Attorney Docket Number	251502009000

To: Commissioner for Patents  
P.O. Box 1450  
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Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.  
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Name	Thomas E. Clotti	Registration No.	
Date	October 3, 2006	Telephone No.	(650) 813-5702

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Number of pages with cover page:	3	Originals Will Not Follow
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**Comments:**

Atty Docket No: 25150-20090.00  
Application Serial No.: 09/720,858-583  
Filed: June 25, 2001  
Patent No: 6,830,901  
Issued: December 14, 2004  
Inventors: Pieter H. POUWELS *et al.*  
Art Unit: 1652  
Examiner: M. Walicka  
Title: PROPIONIBACTERIUM VECTOR

Enclosed are the following documents:

1. Transmittal - 1 page
2. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address - 1 page

IF YOU DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL  
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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	Patent#: 6,830,901	
	Filing Date	Issued: December 14, 2004	
	First Named Inventor	Pieter H. POUWELS	
	Art Unit	1652	
	Examiner Name	M. Walicka	
Total Number of Pages in This Submission	2	Attorney Docket Number	251502009000

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address - 1 page
Remarks: _____		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	MORRISON & FOERSTER LLP	
Signature	<i>Thomas E. Ciotti</i>	
Printed name	Thomas E. Ciotti	
Date	October 3, 2006	Reg. No. 21,013

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